

ALDEN RESOURCES LLC
332 WEST CUMBERLAND GAP PARKWAY, SUITE 100
CORBIN, KENTUCKY 40701

KPDES Individual Permit
DMRE Permit Number 861-0494
KPDES Form 1
KPDES Form C

Prepared
August 4, 2009

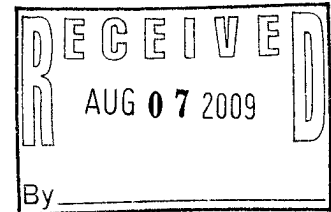


332 W. Cumberland Gap Pkwy., Ste. 100
Corbin, KY 40701

Phone (606) 523-9760 Fax (606) 523-9519

August 4, 2009

ATTN.: Mr. Eric Cleaver
Division of Water
Surface Water Permits Branch
200 Fair Oaks Lane
Frankfort, Kentucky 40601



Re: KPDES Individual Permit Application
DMRE Permit #861-0494
Knox County, Kentucky

Dear Mr. Cleaver:

In response to your letter dated July 13, 2009, please find enclosed a KPDES Individual Permit Application for DMRE Permit No. 861-0494. In addition a "waiver request" is being requested for the KPDES Permit Application Form C under Section V, Part A, subheading 1.f and 1.g due to the outfalls having not discharged since being constructed. Also included with this application packet is the appropriate surface mining permit application filing fee of \$240.00.

Should you have any questions or require additional information, please contact me at (606) 523-9760 or e-mail me at djones@aldenresources.com.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Dennis Jones".

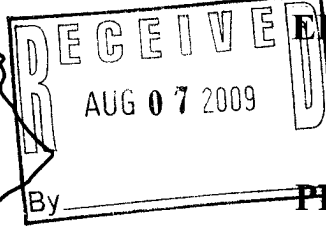
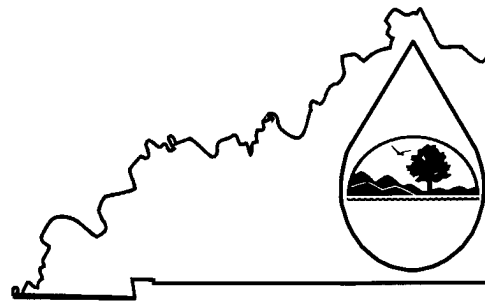
Dennis Jones
Engineering Technician

cc: file
file: Form_1-cvr.doc

KPDES FORM 1

AL# 104609

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM



PERMIT APPLICATION

This is an application to: (check one)

- ☒ Apply for a new permit.
☐ Apply for reissuance of expiring permit.
☐ Apply for a construction permit.
☐ Modify an existing permit.

Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:

Form A, Form B, Form C, Form F, or Form SC

For additional information contact:

KPDES Branch (502) 564-3410

ck 240-

I. FACILITY LOCATION AND CONTACT INFORMATION

AGENCY
USE

0108031

A. Name of Business, Municipality, Company, Etc. Requesting Permit

Alden resources LLC

B. Facility Name and Location

Facility Location Name:

Bull Run Mine

Facility Location Address (i.e. street, road, etc., not P.O. Box):

2.02 miles SE of KY HWY 6 & 459 intersection & 0.62 miles NE of KY HWY 459 & Engle Hollow Road intersection.

Facility Location City, State, Zip Code:

Swan Lake, KY 40921

D. Owner's name (if not the same as in part A and C):

N/A

Owner's Mailing Address: 332 West Cumberland Gap Parkwy, Suite 100 Corbin, KY 40701

C. Primary Mailing Address (all facility correspondence will be sent to this address). Include owner's mailing address (if different) in D.

Facility Contact Name and Title: Mr. ☒ Ms. ☐

Keith Smith

Mailing Address:

332 West Cumberland Gap Parkway, Suite 100

Mailing City, State, Zip Code:

Corbin, Ky 40701

Facility Contact Telephone Number:

606-523-9760

Owner's Telephone Number (if different):

N/A

II. FACILITY DESCRIPTION

A. Provide a brief description of activities, products, etc: Discharge of on-bench dugout ponds constructed to retain sediment during surface coal mining operations.

B. Standard Industrial Classification (SIC) Code and Description

Principal SIC Code & Description:

1221 Bituminous Coal and Lignite Surface Mining

Other SIC Codes:

III. FACILITY LOCATION

A. Attach a U.S. Geological Survey 7 1/2 minute quadrangle map for the site. (See instructions)

B. County where facility is located:

Knox

City where facility is located (if applicable):

N/A

C. Body of water receiving discharge:

UT to Big Indian Creek (Engle Hollow) & Bull Run

D. Facility Site Latitude (degrees, minutes, seconds):

36° 50' 28.5"

Facility Site Longitude (degrees, minutes, seconds):

83° 57' 31.8"

E. Method used to obtain latitude & longitude (see instructions):

Autocad software

F. Facility Dun and Bradstreet Number (DUNS #) (if applicable): N/A

IV. OWNER/OPERATOR INFORMATION**A. Type of Ownership:**

☐ Publicly Owned ☒ Privately Owned ☐ State Owned ☐ Both Public and Private Owned ☐ Federally owned

B. Operator Contact Information (See instructions)

Name of Treatment Plant Operator:

N/A

Telephone Number:

N/A

Operator Mailing Address (Street):

N/A

Operator Mailing Address (City, State, Zip Code):

N/A

Is the operator also the owner?

Yes ☐ No ☐

Is the operator certified? If yes, list certification class and number below.

Yes ☐ No ☐

Certification Class:

N/A

Certification Number:

N/A

V. EXISTING ENVIRONMENTAL PERMITS

Current NPDES Number:

N/A

Issue Date of Current Permit:

N/A

Expiration Date of Current Permit:

N/A

Number of Times Permit Reissued:

N/A

Date of Original Permit Issuance:

N/A

Sludge Disposal Permit Number:

N/A

Kentucky DOW Operational Permit #:

N/A

Kentucky DSMRE Permit Number(s):

861-0494

N/A

Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source	N/A	N/A
Solid or Special Waste	N/A	N/A
Hazardous Waste - Registration or Permit	N/A	N/A

VI. DISCHARGE MONITORING REPORTS (DMRs)

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). Information in this section serves to specifically identify the name and telephone number of the DMR official and the DMR mailing address (if different from the primary mailing address in Section I.C).

A. DMR Official (i.e., the department, office or individual designated as responsible for submitting DMR forms to the Division of Water):

Alden Resources LLC

DMR Official Telephone Number:

606-523-9760

B. DMR Mailing Address:

- Address the Division of Water will use to mail DMR forms (if different from mailing address in Section I.C), or
- Contact address if another individual, company, laboratory, etc. completes DMRs for you; e.g., contract laboratory address.

DMR Mailing Name:

Keith Smith

DMR Mailing Address:

332 West Cumberland Gap Parkway, Suite 100

DMR Mailing City, State, Zip Code:

Corbin, KY 40701

VII. APPLICATION FILING FEE

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount (for permit renewals, please include the KPDES permit number on the check to ensure proper crediting). Descriptions of the base fee amounts are given in the "General Instructions."

Facility Fee Category:

Surface Mining Operation

Filing Fee Enclosed:

\$240.00

VIII. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print):

Mr. ☒ Ms. ☐ Keith Smith, President

SIGNATURE



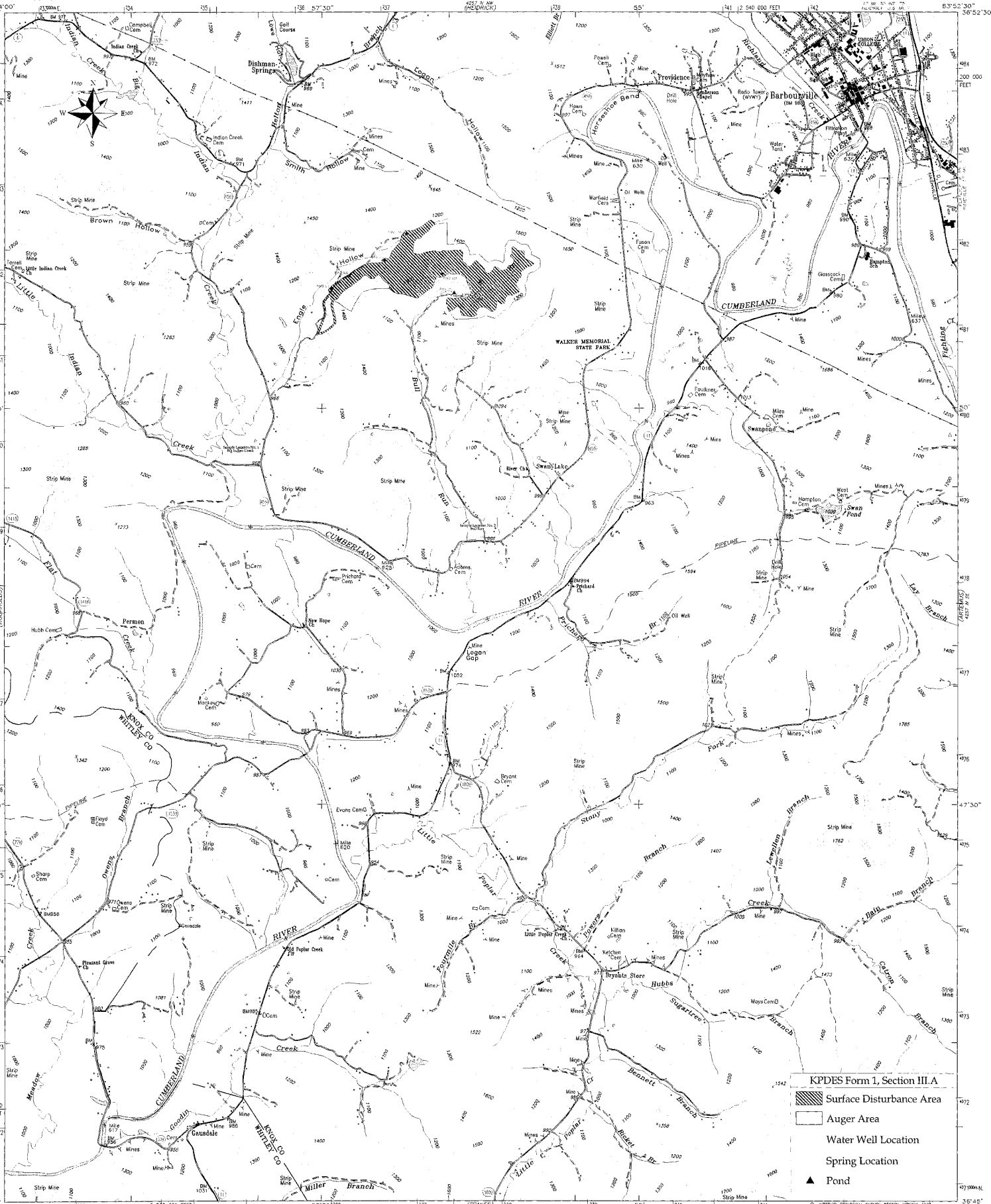
TELEPHONE NUMBER (area code and number):

606-523-9760

DATE:

8-4-09

Return completed application form and attachments to: **KPDES Branch, Division of Water, Frankfort Office Park, 14 Reilly Road, Frankfort, KY 40601. Direct questions to: KPDES Branch at (502) 564-3410.**

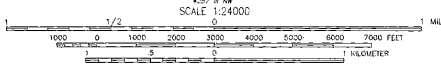


KPDES Form 1, Section III.A

- Surface Disturbance Area
- Auger Area
- Water Well Location
- Spring Location
- Pond

ROAD CLASSIFICATION

- Primary highway, hard surface
- Light-duty road, hard or improved surface
- Secondary highway, hard surface
- Unimproved road
- Interstate Route
- U.S. Route
- State Route



CONTOUR INTERVAL 20 FEET
NATIONAL GEODETIC VERTICAL DATUM OF 1929

Mapped, edited, and published by the Geological Survey

Control by USGS and NOS/NOAA

Topography by photogrammetric methods from aerial photographs taken 1961. Field checked 1962. Revised from aerial photographs taken 1973. Field checked 1974.

Polycrystic projection, 1927 North American datum

10,000 foot and based on Kentucky coordinate system, south zone

1000-meter Universal Transverse Mercator grid lines

Zone 17, shown in blue

UTM GRID AND 1927 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

THIS MAP COMPLIES WITH NATIONAL MAP ACCURACY STANDARDS FOR SALE BY U.S. GEOLOGICAL SURVEY, RESTON, VIRGINIA 22092

KENTUCKY GEOLOGICAL SURVEY, LEXINGTON, KENTUCKY 40506

AND KENTUCKY DEPARTMENT OF COMMERCE, FRANKFORT, KENTUCKY 40601

A FOLDER DESCRIBING TOPOGRAPHIC MAPS AND SYMBOLS IS AVAILABLE ON REQUEST

BARBOURVILLE, KY.

SW 1/4 BARBOURVILLE 15' QUADRANGLE

N3645-WB353.5/7.5

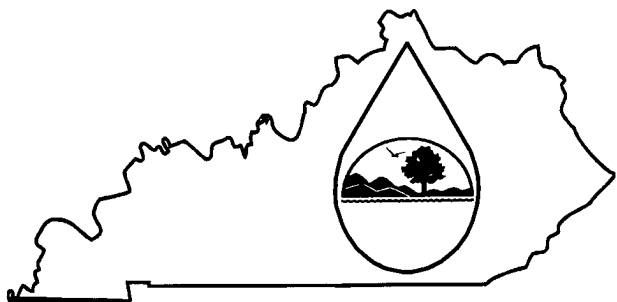
1974

AMS 4257 IV SW-SERIES 1953

KPDES FORM C

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION



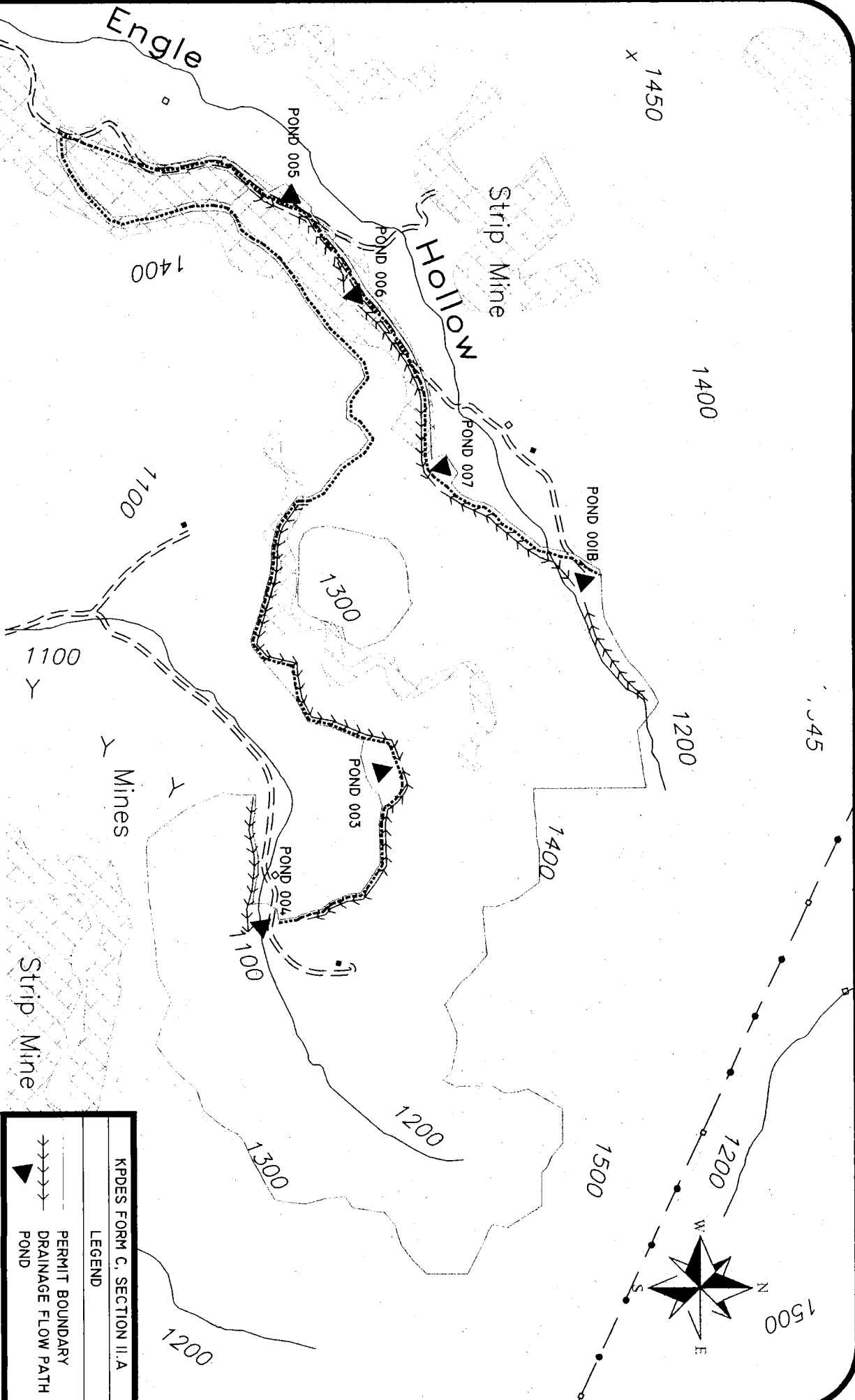
A complete application consists of this form and Form 1.
For additional information, contact KPDES Branch, (502) 564-3410.

Name of Facility: Bull Run Mine				County: Knox			
I. OUTFALL LOCATION				AGENCY USE			
For each outfall list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.							
Outfall No. (list)	LATITUDE			LONGITUDE			RECEIVING WATER (name)
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	
See Appendix A							

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

- A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfall. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.
- B. For each outfall, provide a description of: (1) all operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) the average flow contributed by each operation; and (3) the treatment received by the wastewater. Continue on additional sheets if necessary.

OUTFALL NO. (list)	OPERATION(S) CONTRIBUTING FLOW		TREATMENT	
	Operation (list)	Avg/Design Flow (include units)	Description	List Codes from Table C-1
	See Appendix B			



1450
x

1400

1200

1450

1500

1500

1200

1400

1200

1100

POND 004

POND 003

1300

1100

1400

POND 005

POND 006

POND 007

POND 001B

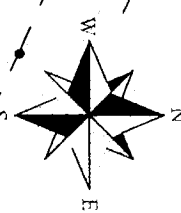
Engle

Strip Mine

Hollow

Mines

Strip Mine



KPDES FORM C, SECTION II, A	
LEGEND	
—	PERMIT BOUNDARY
→→→→	DRAINAGE FLOW PATH
▲	POND

ALDEN RESOURCES LLC

332 West Cumberland Gap Parkway
Suite 100

Corbin, Kentucky 40701

DMRE Permit #861-0494
Water Drainage Flow

DATE
08/04/2009

SHEET NO.
1 of 1

SCALE
1" = 1000'

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES (Continued)

C. Except for storm water runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

☐ Yes (Complete the following table.) ☒ No (Go to Section III.)

OUTFALL NUMBER (list)	OPERATIONS CONTRIBUTING FLOW (list)	FREQUENCY		FLOW				
		Days Per Week (specify average)	Months Per Year (specify average)	Flow Rate (in mgd)		Total volume (specify with units)		Duration (in days)
				Long-Term Average	Maximum Daily	Long-Term Average	Maximum Daily	

III. MAXIMUM PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☐ Yes (Complete Item III-B) List effluent guideline category:
☒ No (Go to Section IV)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measures of operation)?

☐ Yes (Complete Item III-C) ☒ No (Go to Section IV)

3. If you answered "Yes" to Item III-B, list the quantity which represents the actual measurement of your maximum level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

MAXIMUM QUANTITY			Affected Outfalls (list outfall numbers)
Quantity Per Day	Units of Measure	Operation, Product, Material, Etc. (specify)	

IV. IMPROVEMENTS

A. Are you now required by any federal, state or local authority to meet any implementation schedule for the construction, upgrading, or operation of wastewater equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders and grant or loan conditions.

☐ Yes (Complete the following table) ☒ No (Go to Item IV-B)

IDENTIFICATION OF CONDITION AGREEMENT, ETC.	AFFECTED OUTFALLS		BRIEF DESCRIPTION OF PROJECT	FINAL COMPLIANCE DATE	
	No.	Source of Discharge		Required	Projected

3. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding – Complete one set of tables for each outfall – Annotate the outfall number in the space provided.

NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered 5-18.

D. Use the space below to list any of the pollutants (refer to SARA Title III, Section 313) listed in Table C-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

POLLUTANT	SOURCE	POLLUTANT	SOURCE

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

A. Is any pollutant listed in Item V-C a substance or a component of a substance which you use or produce, or expect to use or produce over the next 5 years as an immediate or final product or byproduct?

☐

Yes (List all such pollutants below)

☒

No (Go to Item VI-B)

--

B. Are your operations such that your raw materials, processes, or products can reasonably be expected to vary so that your discharge of pollutants may during the next 5 years exceed two times the maximum values reported in Item V?

☐

Yes (Complete Item VI-C)

☒

No (Go to Item VII)

C. If you answered "Yes" to Item VI-B, explain below and describe in detail to the best of your ability at this time the sources and expected levels of such pollutants which you anticipate will be discharged from each outfall over the next 5 years. Continue on additional sheets if you need more space.

--

VII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge of or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ Yes (Identify the test(s) and describe their purposes below)

☒ No (Go to Section VIII)

VIII. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?


☒ Yes (list the name, address, and telephone number of, and pollutants analyzed by each such laboratory or firm below)

☐ No (Go to Section IX)

NAME	ADDRESS	TELEPHONE (Area code & number)	POLLUTANTS ANALYZED (list)
Fouser Environmental servicers, LTD.	165 Camden Avenue Versailles, KY 40383	859-873-6211	pH; Oil & Grease, T; Cyanide, Total; Phenol; Hardness; BOD; TSS; Amonium-N; COD; TOC; Nitrate-N; Nitrite-N; Sulfate; Antimony; Arsenic; Beryllium; Cadmium; Chromium, Total; Copper; Iron; Lead; Manganese; Mercury; Nickel; Selenium; Silver; Thallium; Zinc

IX. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print): Keith Smith, President	TELEPHONE NUMBER (area code and number): 606-532-9760
SIGNATURE 	DATE 2-4-09

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (use the same format) instead of completing these pages. (See instructions)

V. INTAKE AND EFFLUENT CHARACTERISTICS (Continued from page 3 of Form C)										OUTFALL NO. Site #1 – Big Indian Creek	
Part A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.											
1. POLLUTANT	2. EFFLUENT				3. UNITS (specify if blank)		4. INTAKE (optional)				
	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value (1) Concentration	b. No of Analyses
	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass					
a. Biochemical Oxygen Demand (BOD)	<3	<3					1	mg/L	mg		
b. Chemical Oxygen Demand (COD)	14	14					1	mg/L	mg		
c. Total Organic Carbon (TOC)	2.49	2.49					1	mg/L	mg		
d. Total Suspended Solids (TSS)	3	3					1	mg/L	mg		
e. Ammonia (as N)	0.13	0.13					1	mg/L	mg		
f. Flow (in units of MGD)	VALUE	WR	VALUE		VALUE				MGD	VALUE	
g. Temperature (winter)	VALUE	WR	VALUE		VALUE				WR °C	VALUE	
h. Temperature (summer)	VALUE	10.1	VALUE		VALUE		1		10.1 °C	VALUE	
i. pH	MINIMUM 7.4	MAXIMUM 7.4	MINIMUM	MAXIMUM			1		STANDARD UNITS 7.4		

Part B - In the MARK "X" column, place an "X" in the Believed Present column for each pollutant you know or have reason to believe is present. Place an "X" in the Believed Absent column for each pollutant you believe to be absent. If you mark the Believed Present column for any pollutant, you must provide the results of at least one analysis for that pollutant. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. (if available)	2. MARK "X"		3. EFFLUENT								4. UNITS		6. INTAKE (optional)		
	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg		b. No. of Analyses	
			(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Value	(2) Mass		
a. Bromide (24959-67-9)		X													
b. Bromine Total Residual		X													
c. Chloride		X													
d. Chlorine, Total Residual		X													
e. Color		X													
f. Fecal Coliform		X													
g. Fluoride (16984-48-8)		X													
h. Hardness (as CaCO ₃)	X		196	196					1	mg/L	mg				
i. Nitrate - Nitrite (as N)		X	<0.5 / <0.25	<0.5 / <0.25					1	mg/L	mg				
j. Nitrogen, Total Organic (as N)		X													
k. Oil and Grease	X		<2.00	<2.00					1	mg/L	mg				
l. Phosphorous (as P), Total 7723-14-0		X													
m.															
Radioactivity															
(1) Alpha, Total		X													
(2) Beta, Total		X													
(3) Radium Total		X													
(4) Radium, 226, Total		X													

Part B - Continued														
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"		3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Believed Present	b. Believed Absent	a.		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a.		b. No. of Analyses
			Maximum Daily Value (1)	Mass (2)	Concentration (1)	Mass (2)	Concentration (1)	Mass (2)						
n. Sulfate (as SO ₄) (14808-79-8)	X		127	127					1	mg/L	mg			
o. Sulfide (as S)		X												
p. Sulfite (as SO ₃) (14286-46-3)		X												
q. Surfactants		X												
r. Aluminum, Total (7429-90)		X												
s. Barium, Total (7440-39-3)		X												
t. Boron, Total (7440-42-8)		X												
u. Cobalt, Total (7440-48-4)		X												
v. Iron, Total (7439-89-6)	X		0.488	0.488					1	mg/L	mg			
w. Magnesium Total (7439-96-4)		X												
x. Molybdenum Total (7439-98-7)		X												
y. Manganese, Total (7439-96-6)	X		0.252	0.252					1	mg/L	mg			
z. Tin, Total (7440-31-5)		X												
aa. Titanium, Total (7440-32-6)		X												

Part C – If you are a primary industry and this outfall contains process wastewater, refer to Table C-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in the **Testing Required** column for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark this column (secondary industries, nonprocess wastewater outfalls, and non-required GC/MS fractions), mark "X" in the **Believed Present** column for each pollutant you know or have reason to believe is present. Mark "X" in the **Believed Absent** column for each pollutant you believe to be absent. If you mark either the **Testing Required** or **Believed Present** columns for any pollutant, you must provide the result of at least one analysis for that pollutant. Note that there are seven pages to this part; please review each carefully. Complete one table (all seven pages) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
METALS, CYANIDE AND TOTAL PHENOLS															
1M. Antimony Total (7440-36-0)	X			<0.010	<0.010					1	mg/L	mg			
2M. Arsenic, Total (7440-38-2)	X			<0.010	<0.010					1	mg/L	mg			
3M. Beryllium Total (7440-41-7)	X			<0.005	<0.005					1	mg/L	mg			
4M. Cadmium Total (7440-43-9)	X			<0.0025	<0.0025					1	mg/L	mg			
5M. Chromium Total (7440-43-9)	X			<0.010	<0.010					1	mg/L	mg			
6M. Copper Total (7550-50-8)	X			<0.010	<0.010					1	mg/L	mg			
7M. Lead Total (7439-92-1)	X			<0.010	<0.010					1	mg/L	mg			
8M. Mercury Total (7439-97-6)	X			<0.0001	<0.0001					1	mg/L	mg			
9M. Nickel, Total (7440-02-0)	X			<0.010	<0.010					1	mg/L	mg			
10M. Selenium, Total (7782-49-2)	X			<0.010	<0.010					1	mg/L	mg			
11M. Silver, Total (7440-28-0)	X			<0.005	<0.005					1	mg/L	mg			

Part C – Continued																
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a.		b. Maximum 30-Day		c. Long-Term Avg.		d. No. of Analyses	a. Concentration	b. Mass	a.		b. No. of Analyses	
				Maximum (1) Concentration	Daily Value (2) Mass	Value (if available) (1) Concentration	Mass (2) Mass	Value (if available) (1) Concentration	Mass (2) Mass							
METALS, CYANIDE AND TOTAL PHENOLS (Continued)																
12M. Thallium, Total (7440-28-0)	X			<0.010	<0.010					1	mg/l	mg				
13M. Zinc, Total (7440-66-6)	X			<0.010	<0.010					1	mg/L	mg				
14M. Cyanide, Total (57-12-5)	X			<0.01	<0.01					1	mg/L	mg				
15M. Phenols, Total	X			<0.05	<0.05					1	mg/L	mg				
DIOXIN																
2,3,7,8 Tetra- chlorodibenzo, P, Dioxin (1784-01-6)			X	DESCRIBE RESULTS:												
GC/MS FRACTION – VOLATILE COMPOUNDS																
IV. Acrolein (107-02-8)			X													
2V. Acrylonitrile (107-13-1)			X													
3V. Benzene (71-43-2)			X													
5V. Bromoform (75-25-2)			X													
6V. Carbon Tetrachloride (56-23-5)			X													
7V. Chloro- benzene (108-90-7)			X													
8V. Chlorodiro- m methane (124-48-1)			X													

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass						
9V. Chloroethane (74-00-3)			X												
10V. 2-Chloro- ethylvinyl Ether (110-75-8)			X												
11V. Chloroform (67-66-3)			X												
12V. Dichloro- bromomethane (75-71-8)			X												
14V. 1,1- Dichloroethane (75-34-3)			X												
15V. 1,2- Dichloroethane (107-06-2)			X												
16V. 1,1- Dichloroethylene (75-35-4)			X												
17V. 1,2-Di- chloropropane (78-87-5)			X												
18V. 1,3- Dichloropro- pylene (452-75-6)			X												
19V. Ethyl- benzene (100-41-4)			X												
20V. Methyl Bromide (74-83-9)			X												

Part C - Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)		
a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses
			(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
21V. Methyl Chloride (74-87-3)		X												
22V. Methylene Chloride (75-00-2)		X												
23V. 1,1,2,2-Tetrachloro-ethane (79-34-5)		X												
24V. Tetrachloro-ethylene (127-18-4)		X												
25V. Toluene (108-88-3)		X												
26V. 1,2-Trans-Dichloro-ethylene (156-60-5)		X												
27V. 1,1,1-Trichloroethane (71-55-6)		X												
28V. 1,1,2-Trichloroethane (79-00-5)		X												
29V. Trichloro-ethylene (79-01-6)		X												
30V. Vinyl Chloride (75-01-4)		X												

Part C – Continued															
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2-Chloro-phenol (95-57-8)			X												
2A. 2,4-Dichloro- Orophenol (120-83-2)			X												
3A. 2,4-Dimeth- ylphenol (105-67-9)			X												
4A. 4,6-Dinitro- o-cresol (534-52-1)			X												
5A. 2,4-Dinitro- phenol (51-28-5)			X												
6A. 2-Nitro- phenol (88-75-5)			X												
7A. 4-Nitro- phenol (100-02-7)			X												
8A. P-chloro-m- cresol (59-50-7)			X												
9A. Pentachloro- phenol (87-88-5)			X												
10A. Phenol (108-05-2)			X												
11A. 2,4,6-Tri- chlorophenol (88-06-2)			X												
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acena- phtene (83-32-9)			X												

Part C – Continued															
1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)															
2B. Acena- phyllene (208-96-8)			X												
3B. Anthra- cene (120-12-7)			X												
4B. Benzidine (92-87-5)			X												
5B. Benzo(a)- anthracene (56-55-3)			X												
6B. Benzo(a)- pyrene (50-32-8)			X												
7B. 3,4-Benzo- fluoranthene (205-99-2)			X												
8B. Benzo(ghi) perylene (191-24-2)			X												
9B. Benzo(k)- fluoranthene (207-08-9)			X												
10B. Bis(2- chlor- oethoxy)- methane (111-91-1)			X												
11B. Bis (2-chlor- oisopropyl)- Ether			X												
12B. Bis (2-ethyl- hexyl)- phthalate (117-81-7)			X												

Part C – Continued																
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a.		b. Maximum 30-Day		c. Long-Term Avg.		d. No. of Analyses	a. Concentration	b. Mass	a.		b. No. of Analyses	
				Maximum Daily Value (1)	Mass (2)	Value (if available) (1)	Mass (2)	Value (if available) (1)	Mass (2)				Long-Term Avg Value (1)	Mass (2)		
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)																
13B. 4-Bromo-phenyl Phenyl ether (101-55-3)			X													
14B. Butyl-benzyl phthalate (85-68-7)			X													
15B. 2-Chloro-naphthalene (7005-72-3)			X													
16B. 4-Chloro-phenyl phenyl ether (7005-72-3)			X													
17B. Chrysene (218-01-9)			X													
18B. Dibenzo-anthracene (a,h) (53-70-3)			X													
19B. 1,2-Dichloro-benzene (95-50-1)			X													
20B. 1,3-Dichloro-Benzene (541-73-1)			X													
21B. 1,4-Dichloro-benzene (106-46-7)			X													
22B. 3,3-Dichloro-benzidene (91-94-1)			X													
23B. Diethyl Phthalate (84-66-2)			X													

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT								4. UNITS		5. INTAKE (optional)	
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)															
24B. Dimethyl Phthalate (131-11-3)			X												
25B. Di-N-butyl Phthalate (84-74-2)			X												
26B. 2,4-Dinitro-toluene (121-14-2)			X												
27B. 2,6-Dinitro-toluene (606-20-2)			X												
28B. Di-n-octyl Phthalate (117-84-0)			X												
29B. 1,2-diphenyl-hydrazine (as azobenzene) (122-66-7)			X												
30B. Fluoranthene (208-44-0)			X												
31B. Fluorene (86-73-7)			X												
32B. Hexachloro-benzene (118-71-1)			X												
33B. Hexachloro-butadiene (87-68-3)			X												
34B. Hexachloro-cyclopentadiene (77-47-4)			X												

Part C – Continued

Table C – Continued																
1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a.		b. Maximum 30-Day		c. Long-Term Avg.		d. No. of Analyses	a. Concentration	b. Mass	a.		b.	
				Maximum Daily Value (1)	Value (2)	Value (if available) (1)	Value (2)	Value (if available) (1)	Value (2)				Long-Term Avg Value (1)	Value (2)		No. of Analyses
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)																
35B. Hexachloroethane (67-72-1)			X													
36B. Indeno-(1,2,3-oc)-Pyrene (193-39-5)			X													
37B. Isophorone (78-59-1)			X													
38B. Naphthalene (91-20-3)			X													
39B. Nitrobenzene (98-95-3)			X													
40B. N-Nitrosodimethylamine (62-75-9)			X													
41B. N-nitrosodi-n-propylamine (621-64-7)			X													
42B. N-nitrosodiphenylamine (86-30-6)			X													
43B. Phenanthrene (85-01-8)			X													
44B. Pyrene (129-00-0)			X													
45B. 1,2,4 Trichlorobenzene (120-82-1)			X													

Part C – Continued															
1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – PESTICIDES															
1P. Aldrin (309-00-2)			X												
2P. α-BHC (319-84-6)			X												
3P. β-BHC (58-89-9)			X												
4P. gamma-BHC (58-89-9)			X												
5P. δ-BHC (319-86-8)			X												
6P. Chlordane (57-74-9)			X												
7P. 4,4'-DDT (50-29-3)			X												
8P. 4,4'-DDE (72-55-9)			X												
9P. 4,4'-DDD (72-54-8)			X												
10P. Dieldrin (60-57-1)			X												
11P. α- Endosulfan (115-29-7)			X												
12P. β- Endosulfan (115-29-7)			X												
13P. Endosulfan Sulfate (1031-07-8)			X												
14P. Endrin (72-20-8)			X												

Part C – Continued															
1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – PESTICIDES															
15P. Endrin Aldehyde (7421-93-4)			X												
16P Heptachlor (76-44-8)			X												
17P. Heptaclor Epoxide (1024-57-3)			X												
18P. PCB-1242 (53469-21-9)			X												
19P. PCB-1254 (11097-69-1)			X												
20P. PCB-1221 (11104-28-2)			X												
21P. PCB-1232 (11141-16-5)			X												
22P. PCB-1248 (12672-29-6)			X												
23P. PCB-1260 (11096-82-5)			X												
24P. PCB-1016 (12674-11-2)			X												
25P. Toxaphene (8001-35-2)			X												

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (use the same format) instead of completing these pages. (See instructions)

V. INTAKE AND EFFLUENT CHARACTERISTICS (Continued from page 3 of Form C)											OUTFALL NO. <i>Site #2 - Bull Run</i>	
Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.												
1. POLLUTANT	2. EFFLUENT						3. UNITS (specify if blank)		4. INTAKE (optional)			
	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a.		b. No of Analyses
	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
a. Biochemical Oxygen Demand (BOD)	<3	<3					1	mg/L	mg			
b. Chemical Oxygen Demand (COD)	<10	<10					1	mg/L	mg			
c. Total Organic Carbon (TOC)	2.07	2.07					1	mg/L	mg			
d. Total Suspended Solids (TSS)	2	2					1	mg/L	mg			
e. Ammonia (as N)	0.17	0.17					1	mg/L	mg			
f. Flow (in units of MGD)	VALUE		VALUE		VALUE				MGD	VALUE		
g. Temperature (winter)	VALUE	WR	VALUE		VALUE				%	VALUE		
h. Temperature (summer)	VALUE	8.3	VALUE		VALUE		1		8.3 %	VALUE		
i. pH	MINIMUM 7.34	MAXIMUM 7.34	MINIMUM	MAXIMUM			1	STANDARD UNITS 7.34				

Part B - In the MARK "X" column, place an "X" in the Believed Present column for each pollutant you know or have reason to believe is present. Place an "X" in the Believed Absent column for each pollutant you believe to be absent. If you mark the Believed Present column for any pollutant, you must provide the results of at least one analysis for that pollutant. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. (if available)	2. MARK "X"		3. EFFLUENT						4. UNITS		6. INTAKE (optional)			
	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
			(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
a. Bromide (24959-67-9)		X												
b. Bromine Total Residual		X												
c. Chloride		X												
d. Chlorine, Total Residual		X												
e. Color		X												
f. Fecal Coliform		X												
g. Fluoride (16984-48-8)		X												
h. Hardness (as CaCO ₃)	X		300	300					1	mg/L	mg			
i. Nitrate – Nitrite (as N)		X	<0.5 / <0.25	<0.5 / <0.25					1	mg/L	mg			
j. Nitrogen, Total Organic (as N)		X												
k. Oil and Grease	X		<2.00	<2.00					1	mg/L	mg			
l. Phosphorous (as P), Total 7723-14-0		X												
m. Radioactivity														
(1) Alpha, Total		X												
(2) Beta, Total		X												
(3) Radium Total		X												
(4) Radium, 226, Total		X												

Part B - Continued												
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"		3. EFFLUENT						4. UNITS		5. INTAKE (optional)	
	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	b. No. of Analyses
			(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				
n. Sulfate (as SO ₄) (14808-79-8)	X		184	184					1	mg/L	mg	
o. Sulfide (as S)		X										
p. Sulfite (as SO ₃) (14286-46-3)		X										
q. Surfactants		X										
r. Aluminum, Total (7429-90)		X										
s. Barium, Total (7440-39-3)		X										
t. Boron, Total (7440-42-8)		X										
u. Cobalt, Total (7440-48-4)		X										
v. Iron, Total (7439-89-6)	X		0.331	0.331					1	mg/L	mg	
w. Magnesium Total (7439-96-4)		X										
x. Molybdenum Total (7439-98-7)		X										
y. Manganese, Total (7439-96-6)	X		0.116	0.116					1	mg/L	mg	
z. Tin, Total (7440-31-5)		X										
aa. Titanium, Total (7440-32-6)		X										

Part C – If you are a primary industry and this outfall contains process wastewater, refer to Table C-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark “X” in the **Testing Required** column for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark this column (secondary industries, nonprocess wastewater outfalls, and non-required GC/MS fractions), mark “X” in the **Believed Present** column for each pollutant you know or have reason to believe is present. Mark “X” in the **Believed Absent** column for each pollutant you believe to be absent. If you mark either the **Testing Required** or **Believed Present** columns for any pollutant, you must provide the result of at least one analysis for that pollutant. Note that there are seven pages to this part; please review each carefully. Complete one table (all seven pages) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
METALS, CYANIDE AND TOTAL PHENOLS															
1M. Antimony Total (7440-36-0)	X			<0.010	<0.010					1	mg/L	mg			
2M. Arsenic, Total (7440-38-2)	X			<0.010	<0.010					1	mg/L	mg			
3M. Beryllium Total (7440-41-7)	X			<0.005	<0.005					1	mg/L	mg			
4M. Cadmium Total (7440-43-9)	X			<0.0025	<0.0025					1	mg/L	mg			
5M. Chromium Total (7440-43-9)	X			<0.010	<0.010					1	mg/L	mg			
6M. Copper Total (7550-50-8)	X			<0.010	<0.010					1	mg/L	mg			
7M. Lead Total (7439-92-1)	X			<0.010	<0.010					1	mg/L	mg			
8M. Mercury Total (7439-97-6)	X			<0.0001	<0.0001					1	mg/L	mg			
9M. Nickel, Total (7440-02-0)	X			<0.010	<0.010					1	mg/L	mg			
10M. Selenium, Total (7782-49-2)	X			<0.010	<0.010					1	mg/L	mg			
11M. Silver, Total (7440-28-0)	X			<0.005	<0.005					1	mg/L	mg			

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
METALS, CYANIDE AND TOTAL PHENOLS (Continued)															
12M. Thallium, Total (7440-28-0)	X			<0.010	<0.010					1	mg/l	mg			
13M. Zinc, Total (7440-66-6)	X			<0.010	<0.010					1	mg/L	mg			
14M. Cyanide, Total (57-12-5)	X			<0.01	<0.01					1	mg/L	mg			
15M. Phenols, Total	X			<0.05	<0.05					1	mg/L	mg			
DIOXIN															
2,3,7,8 Tetra- chlorodibenzo, P, Dioxin (1784-01-6)			X	DESCRIBE RESULTS:											
GC/MS FRACTION – VOLATILE COMPOUNDS															
IV. Acrolein (107-02-8)			X												
2V. Acrylonitrile (107-13-1)			X												
3V. Benzene (71-43-2)			X												
5V. Bromoform (75-25-2)			X												
6V. Carbon Tetrachloride (56-23-5)			X												
7V. Chloro- benzene (108-90-7)			X												
8V. Chlorodifluoro- methane (124-48-1)			X												

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
9V. Chloroethane (74-00-3)			X												
10V. 2-Chloro- ethylvinyl Ether (110-75-8)			X												
11V. Chloroform (67-66-3)			X												
12V. Dichloro- bromomethane (75-71-8)			X												
14V. 1,1- Dichloroethane (75-34-3)			X												
15V. 1,2- Dichloroethane (107-06-2)			X												
16V. 1,1- Dichloroethylene (75-35-4)			X												
17V. 1,2-Di- chloropropane (78-87-5)			X												
18V. 1,3- Dichloropro- pylene (452-75-6)			X												
19V. Ethyl- benzene (100-41-4)			X												
20V. Methyl Bromide (74-83-9)			X												

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
21V. Methyl Chloride (74-87-3)			X												
22V. Methylene Chloride (75-00-2)			X												
23V. 1,1,2,2- Tetrachloro- ethane (79-34-5)			X												
24V. Tetrachloro- ethylene (127-18-4)			X												
25V. Toluene (108-88-3)			X												
26V. 1,2-Trans- Dichloro- ethylene (156-60-5)			X												
27V. 1,1,1-Tr- chloroethane (71-55-6)			X												
28V. 1,1,2-Tr- chloroethane (79-00-5)			X												
29V. Trichloro- ethylene (79-01-6)			X												
30V. Vinyl Chloride (75-01-4)			X												

Part C – Continued															
1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2-Chloro-phenol (95-57-8)			X												
2A. 2,4-Dichlor-Orophenol (120-83-2)			X												
3A. 2,4-Dimeth-ylphenol (105-67-9)			X												
4A. 4,6-Dinitro-o-cresol (534-52-1)			X												
5A. 2,4-Dinitro-phenol (51-28-5)			X												
6A. 2-Nitro-phenol (88-75-5)			X												
7A. 4-Nitro-phenol (100-02-7)			X												
8A. P-chloro-ni-cresol (59-50-7)			X												
9A. Pentachloro-phenol (87-88-5)			X												
10A. Phenol (108-05-2)			X												
11A. 2,4,6-Tri-chlorophenol (88-06-2)			X												
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acena-phthene (83-32-9)			X												

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses	
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass		
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)																
2B. Acena- phyene (208-96-8)			X													
3B. Anthra- cene (120-12-7)			X													
4B. Benzidine (92-87-5)			X													
5B. Benzo(a)- anthracene (56-55-3)			X													
6B. Benzo(a)- pyrene (50-32-8)			X													
7B. 3,4-Benzo- fluoranthene (205-99-2)			X													
8B. Benzo(ghi) perylene (191-24-2)			X													
9B. Benzo(k)- fluoranthene (207-08-9)			X													
10B. Bis(2- chlor- oethoxy)- methane (111-91-1)			X													
11B. Bis (2-chlor- oisopropyl)- Ether			X													
12B. Bis (2-ethyl- hexyl)- phthalate (117-81-7)			X													

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"		3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)															
13B. 4-Bromo-phenyl Phenyl ether (101-55-3)			X												
14B. Butyl-benzyl phthalate (85-68-7)			X												
15B. 2-Chloro-naphthalene (7005-72-3)			X												
16B. 4-Chloro-phenyl phenyl ether (7005-72-3)			X												
17B. Chrysene (218-01-9)			X												
18B. Dibenzo-anthracene (a,h) (53-70-3)			X												
19B. 1,2-Dichloro-benzene (95-50-1)			X												
20B. 1,3-Dichloro-Benzene (541-73-1)			X												
21B. 1,4-Dichloro-benzene (106-46-7)			X												
22B. 3,3-Dichloro-benzidine (91-94-1)			X												
23B. Diethyl Phthalate (84-66-2)			X												

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT						4. UNITS		5. INTAKE (optional)				
	a. Testing Required	a. Believed Present	b. Believed Absent	a.		b. Maximum 30-Day		c. Long-Term Avg.		d. No. of Analyses	a. Concentration	b. Mass	a.		b. No. of Analyses	
				Maximum Daily Value (1)	Concentration (2)	Value (if available) (1)	Mass (2)	Value (if available) (1)	Mass (2)				Long-Term Avg. Value (1)	Concentration (2)		
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)																
24B. Dimethyl Phthalate (131-11-3)			X													
25B. Di-N- butyl Phthalate (84-74-2)			X													
26B. 2,4-Dinitro- toluene (121-14-2)			X													
27B. 2,6-Dinitro- toluene (606-20-2)			X													
28B. Di-n-octyl Phthalate (117-84-0)			X													
29B. 1,2- diphenyl- hydrazine (as azobenzene) (122-66-7)			X													
30B. Fluoranthene (208-44-0)			X													
31B. Fluorene (86-73-7)			X													
32B. Hexachloro- benzene (118-71-1)			X													
33B. Hexachloro- butadiene (87-68-3)			X													
34B. Hexachloro- cyclopenta- diene (77-47-4)			X													

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a.		b. Maximum 30-Day		c. Long-Term Avg.		d. No. of Analyses	a. Concentration	b. Mass	a.		b. No. of Analyses	
				Maximum Daily Value (1)	Mass (2)	Value (if available) (1)	Mass (2)	Value (if available) (1)	Mass (2)				Long-Term Avg Value (1)	Mass (2)		
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)																
35B. Hexachloroethane (67-72-1)			X													
36B. Indeno-(1,2,3-oc)-Pyrene (193-39-5)			X													
37B. Isophorone (78-59-1)			X													
38B. Naphthalene (91-20-3)			X													
39B. Nitrobenzene (98-95-3)			X													
40B. N-Nitrosodimethylamine (62-75-9)			X													
41B. N-nitrosodi-n-propylamine (621-64-7)			X													
42B. N-nitrosodiphenylamine (86-30-6)			X													
43B. Phenanthrene (85-01-8)			X													
44B. Pyrene (129-00-0)			X													
45B. 1,2,4 Trichlorobenzene (120-82-1)			X													

Part C – Continued

1. POLLUTANT And CAS NO. (if available)		2. MARK "X"		3. EFFLUENT						4. UNITS		5. INTAKE (optional)		
a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses
			(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – PESTICIDES														
1P. Aldrin (309-00-2)		X												
2P. α-BHC (319-84-6)		X												
3P. β-BHC (58-89-9)		X												
4P. gamma-BHC (58-89-9)		X												
5P. δ-BHC (319-86-8)		X												
6P. Chlordane (57-74-9)		X												
7P. 4,4'-DDT (50-29-3)		X												
8P. 4,4'-DDE (72-55-9)		X												
9P. 4,4'-DDD (72-54-8)		X												
10P. Dieldrin (60-57-1)		X												
11P. α-Endosulfan (115-29-7)		X												
12P. β-Endosulfan (115-29-7)		X												
13P. Endosulfan Sulfate (1031-07-8)		X												
14P. Endrin (72-20-8)		X												

Part C – Continued

1. POLLUTANT And CAS NO. (if available)		2. MARK "X"		3. EFFLUENT						4. UNITS		5. INTAKE (optional)		
a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
			(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – PESTICIDES														
15P. Endrin Aldehyde (7421-93-4)			X											
16P Heptachlor (76-44-8)			X											
17P. Heptachlor Epoxide (1024-57-3)			X											
18P. PCB-1242 (53469-21-9)			X											
19P. PCB-1254 (11097-69-1)			X											
20P. PCB-1221 (11104-28-2)			X											
21P. PCB-1232 (11141-16-5)			X											
22P. PCB-1248 (12672-29-6)			X											
23P. PCB-1260 (11096-82-5)			X											
24P. PCB-1016 (12674-11-2)			X											
25P. Toxaphene (8001-35-2)			X											

Alden Resources LLC
KDSMRE Permit Number 861-0494
KPDES Form C

APPENDIX A

Outfall No. (list)	LATITUDE			LONGITUDE			RECEIVING WATER (name)
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	
001B	36	51	06	83	56	50	UT to Big Indian Creek (Engle Hollow)
003	36	50	51	83	56	33	Bull Run
004	36	50	44	83	56	27	Bull Run
005	36	50	46	83	57	25	UT to Big Indian Creek (Engle Hollow)
006	36	50	50	83	57	17	UT to Big Indian Creek (Engle Hollow)
007	36	50	56	83	57	00	UT to Big Indian Creek (Engle Hollow)

Alden Resources LLC
KDSMRE Permit Number 861-0494
KPDES Form C

APPENDIX B

OUTFALL NO. (list)	OPERATION(S) CONTRIBUTING TO FLOW		TREATMENT	
	Operation (list)	Avg/Design Flow (include units)	Description	List Codes from Table C-1
001B	Sediment Pond	4.375 acre/feet	Onsite distribution	1-U
003	Sediment Pond	2.792 acre/feet	Onsite distribution	1-U
004	Sediment Pond	5.772 acre/feet	Onsite distribution	1-U
005	Sediment Pond	0.804 acre/feet	Onsite distribution	1-U
006	Sediment Pond	0.80 acre/feet	Onsite distribution	1-U
007	Sediment Pond	1.545 acre/feet	Onsite distribution	1-U